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APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/628,304 07/29/2003 Alma L. Coats 14974.0002  TITLE OF INVENTION: STEREOLITHOGRAPHY RESINS AND METHODS 03/21/2007 NNGUYEN2 00000066 194						4474 5 194293 10628304
			01 FC: 02 FC:	2501 1504	700.00 DA 300.00 DA	
APPLN. TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional YES	\$700	\$300	\$0		\$1000	03/21/2007
EXAMINER ART UNIT		CLASS-SUBCLASS				
HAMILTON, CYNTHIA	430-284100	•				
Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (37) (2. For printing on the patent front page, list (38)).						9 Johnson II D
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. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
3 Birds, Inc.	Pompano Beach, Florida					
lease check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🔲 Government						
a. The following fee(s) are submitted:  Signature:  Signature:  Signature:  Advance:  Advance:	<ul> <li>Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4293 (enclose an extra copy of this form).</li> </ul>					
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